

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054732

Entity Name: MSW ENTERPRISES, LLC

FILED
May 08, 2007
Secretary of State

Current Principal Place of Business:

2369 SE 11TH ST
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

2369 SE 11TH ST
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 20-1388189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HARTSELL, ROBERT N ESQ
2407 SE 14TH STREET
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MORALES, LAWRENCE
Address: 2300 SE 14TH STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM () Delete
Name: SEBASTIAN, KEVIN
Address: 2369 SE 11TH ST
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM () Delete
Name: WASHINGTON, SEAN
Address: 2369 SE 11TH ST
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEVIN P. SEBASTIAN

MR.

05/08/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date